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| Fill in this information to identify your case: | | |
|---|---------------------------------|---------------------------------|
| United States Bankruptcy Court for the: | | |
| NORTHERN DISTRICT OF ILLINOIS | _ | |
| Case number (if known) | _ Chapter you are filing under: | |
| | Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | rt 1: | Identify Yourself | | |
|-----|-----------------------|---|--|---|
| | | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | You | r full name | | |
| | your pictu exar | e the name that is on government-issued ure identification (for mple, your driver's use or passport). | Miguel First name A. Middle name | First name Middle name |
| | iden | g your picture tification to your ting with the trustee. | Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III) |
| 2. | | other names you have d in the last 8 years | | |
| | | de your married or den names. | | |
| 3. | you num Indi | y the last 4 digits of r Social Security nber or federal vidual Taxpayer ntification number | xxx-xx-0421 | |

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Case number (if known)

Debtor 1 Miguel A. Ibarra

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
|----|--|---|---|
| 4. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names | ■ I have not used any business name or EINs. Business name(s) EINs | ☐ I have not used any business name or EINs. Business name(s) EINs |
| 5. | Where you live | 1511 South 60th Court | If Debtor 2 lives at a different address: |
| | | First Floor Cicero, IL 60804 Number, Street, City, State & ZIP Code Cook County | Number, Street, City, State & ZIP Code County |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
| | | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code |
| 6. | Why you are choosing this district to file for bankruptcy | Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.) | Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.) |
| | | | |

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Case number (if known) Debtor 1 Miguel A. Ibarra

| art | Tell the Court About | Your Bar | kruptcy C | ase | | |
|-----|---|----------|-----------------------------|--|--|--|
| • | The chapter of the Bankruptcy Code you are | | | | each, see <i>Notice Required by</i> age 1 and check the appropriat | 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy e box. |
| | choosing to file under | ■ Cha | pter 7 | | | |
| | | ☐ Cha | pter 11 | | | |
| | | ☐ Cha | pter 12 | | | |
| | | ☐ Cha | pter 13 | | | |
| • | How you will pay the fee | a o | bout how y | ou may pay. Typica r attorney is submit | ally, if you are paying the fee yo | k with the clerk's office in your local court for more details burself, you may pay with cash, cashier's check, or money alf, your attorney may pay with a credit card or check with |
| | | | | | | on, sign and attach the Application for Individuals to Pay |
| | | □ I b | request th ut is not red | at my fee be waive | ır fee, and may do so only if yo | n only if you are filing for Chapter 7. By law, a judge may, our income is less than 150% of the official poverty line that |
| | | | | | | n installments). If you choose this option, you must fill out cial Form 103B) and file it with your petition. |
| | Have you filed for bankruptcy within the | ■ No. | | | | |
| | last 8 years? | ☐ Yes. | | | | |
| | | | District | | When | Case number |
| | | | District | | When | Case number |
| | | | District | | When | Case number |
|). | Are any bankruptcy cases pending or being | ■ No | | | | |
| | filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ☐ Yes. | | | | |
| | | | Debtor | | | Relationship to you |
| | | | District | | When | Case number, if known |
| | | | Debtor | | | Relationship to you |
| | | | District | | When | Case number, if known |
| 1. | Do you rent your residence? | □ No. | Go to | line 12. | | |
| | rodiudilod : | Yes. | Has y | our landlord obtaine | ed an eviction judgment agains | st you? |
| | | | | No. Go to line 12. | | |
| | | | | Yes. Fill out <i>Initia</i> bankruptcy petitic | | Judgment Against You (Form 101A) and file it with this |

Document Page 4 of 59 Case number (if known) Miguel A. Ibarra Debtor 1 Part 3: Report About Any Businesses You Own as a Sole Proprietor Are you a sole proprietor No. of any full- or part-time Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is ☐ Yes. alleged to pose a threat of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs immediate attention?

For example, do you own perishable goods, or livestock that must be fed, or a building that needs

urgent repairs?

needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

Debtor 1 Miguel A. Ibarra Document Page 5 of 59
Case number (if known)

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 □ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 18-04438 Doc 1 Filed 02/19/18 Entered 02/19/18 17:49:15 Desc Main Document Page 6 of 59 Case number (if known) Miguel A. Ibarra Debtor 1 Answer These Questions for Reporting Purposes Part 6: Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16a. 16. What kind of debts do individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. Are your debts primarily business debts? Business debts are debts that you incurred to obtain 16b. money for a business or investment or through the operation of the business or investment. ☐ Yes. Go to line 17. State the type of debts you owe that are not consumer debts or business debts 16c. I am not filing under Chapter 7. Go to line 18. ☐ No. 17. Are you filing under Chapter 7? I am filling under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Do you estimate that Yes. are paid that funds will be available to distribute to unsecured creditors? after any exempt property is excluded and administrative expenses No. are paid that funds will ☐ Yes be available for distribution to unsecured creditors? **25,001-50,000** 1,000-5,000 18. How many Creditors do 1-49 **50.001-100.000 5001-10,000** you estimate that you □ 50-99 ☐ More than 100,000 owe? □ 10,001-25,000 □ 100-199 □ 200-999 □ \$500,000,001 - \$1 billion ☐ \$1,000,001 - \$10 million 19. How much do you \$0 - \$50,000 □ \$1,000,000,001 - \$10 billion □ \$10,000,001 - \$50 million estimate your assets to □ \$50,001 - \$100,000 ☐ \$10,000,000,001 - \$50 billion be worth? □ \$50,000,001 - \$100 million □ \$100,001 - \$500,000 ☐ More than \$50 billion □ \$100,000,001 - \$500 million □ \$500,001 - \$1 million □ \$500,000,001 - \$1 billion □ \$1,000,001 - \$10 million How much do you □ \$0 - \$50,000 □ \$1,000,000,001 - \$10 billion □ \$10,000,001 - \$50 million estimate your liabilities \$50,001 - \$100,000 □ \$10,000,000,001 - \$50 billion □ \$50,000,001 - \$100 million to be? ☐ \$100,001 - \$500,000 ■ More than \$50 billion ☐ \$100,000,001 - \$500 million □ \$500,001 - \$1 million Sign Below Part 7: I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. For you If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519,

Miguel A. Ibarra
Signature of Debtor 1

Signature of Debtor 2

Executed on

and 3571.

02-16-2018

Executed on

MM / DD / YYYY

Case 18-04438 Doc 1 Filed 02/19/18 Entered 02/19/18 17:49:15 Desc Main Document Page 7 of 59 Case number (if known) Debtor 1 Miguel A. Ibarra I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter For your attorney, if you are for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) represented by one and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the If you are not represented by schedules filed with the petition is incorrect. an attorney, you do not need to file this page. Date

Signature of Attorney for Debtor

Thayer C. Torgerson

Printed name

Law Office of Thayer C. Torgerson

Firm name

2400 North Western Avenue

Chicago, IL 60647

Number, Street, City, State & ZIP Code

Email address

ted@tedtorgersonlaw.com

6204662

Bar number & State

Contact phone 773-772-0844

| | | DOGUIII | eni Paue o ui os | 9 | |
|--------------------------|--------------------------|-------------------|------------------|---|---------------------|
| Fill in this infor | mation to identify your | case: | | | |
| Debtor 1 | Miguel A. Ibarra | | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| Case number _ (if known) | | | | | Check if this is an |
| | | | | | amended filing |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| | | Your as Value o | ssets of what you own |
|-----|--|--------------------|-------------------------------|
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 0.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 10,400.00 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 10,400.00 |
| Par | t 2: Summarize Your Liabilities | | |
| | | | abilities t you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 0.00 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 78,003.00 |
| | Your total liabilities | \$ | 78,003.00 |
| Par | t 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 2,128.31 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 2,100.00 |
| Par | t 4: Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you | ır other sch | nedules. |
| | ■ Yes | | |

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Page 9 of 59 Case number (if known) Debtor 1 Miguel A. Ibarra

| 8. | From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form |
|----|--|
| | 122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14. |

3,141.26 \$

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Total claim | |
|--|-------------|------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 0.00 |

Document Page 10 of 59 Fill in this information to identify your case and this filing: Debtor 1 Miguel A. Ibarra Middle Name Last Name First Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. ☐ Yes. Where is the property? Part 2: **Describe Your Vehicles** Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put Dodge Make: Who has an interest in the property? Check one 3 1 the amount of any secured claims on Schedule D: Neon Creditors Who Have Claims Secured by Property. Debtor 1 only Model: 1996 Debtor 2 only Current value of the Current value of the 140000 Approximate mileage: entire property? portion you own? Debtor 1 and Debtor 2 only Other information: ☐ At least one of the debtors and another \$600.00 \$600.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No □ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$600.00 pages you have attached for Part 2. Write that number here......>> Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

☐ No

Official Form 106A/B Schedule A/B: Property

| Debtor 1 | Miguel A. Ib | oarra | Document | Page 11 of 5 | 59 Case number <i>(if know</i> i | n) |
|------------------------------------|---|---|--------------------------|-----------------------|-------------------------------------|---|
| ■ Yes. | Describe | | | | | |
| | | Household Furniture |) | | | \$1,500.00 |
| ■ No | les: Televisions | and radios; audio, video, ste Il phones, cameras, media | | ment; computers, p | rinters, scanners; music | collections; electronic devices |
| 8. Collect Examp | ibles of value les: Antiques and | d figurines; paintings, prints tions, memorabilia, collectib | | ks, pictures, or othe | er art objects; stamp, co | in, or baseball card collections; |
| Examp No Yes. 10. Firear Exam No | musical insti Describe | ographic, exercise, and other | | oicycles, pool tables | , golf clubs, skis; canoe | s and kayaks; carpentry tools; |
| ☐ No | | clothes, furs, leather coats, o | designer wear, shoes, | accessories | | \$1,000.00 |
| ■ No | | ewelry, costume jewelry, en | gagement rings, wedd | ling rings, heirloom | jewelry, watches, gems | , gold, silver |
| Exam ■ No □ Yes. | arm animals uples: Dogs, cats, Describe | , birds, horses nd household items you d | lid not already list, ir | cluding any healt | n aids you did not list | |
| ■ No □ Yes. | . Give specific in | formation | | | | |
| | | of all of your entries fron number here | | | s you have attached | \$2,500.00 |
| | escribe Your Fina wn or have any | ncial Assets legal or equitable interest | t in any of the follow | ing? | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| ■ No | | have in your wallet, in your | | | d when you file your pet | tition |
| Official For | | | Schedule A/B: P | | | page 2 |

Case 18-04438 Doc 1 Filed 02/19/18 Entered 02/19/18 17:49:15 Desc Main Document Page 12 of 59 Case number (if known) Debtor 1 Miguel A. Ibarra 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: ■ Yes..... **Chase Bank** \$2,300.00 checking account 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No ☐ Yes..... Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No Yes. List each account separately. Type of account: Institution name: 401(k) **Bank** \$5,000.00 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No ☐ Yes. Institution name or individual: 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit No ☐ Yes. Give specific information about them...

27. Licenses, franchises, and other general intangibles

☐ Yes. Give specific information about them...

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

■ No

No

| | | Case 18-04438 | Doc 1 | Filed 02/19/18 Document | Entered 02/19/18 17:49:15 Page 13 of 59 | Desc Main |
|--------------|------------------------|--|-----------------|----------------------------|---|--|
| Debto | or 1 | Miguel A. Ibarra | | Boodinent | Case number (if known) | |
| | Yes. | Give specific information al | oout them | | | |
| Mone | ey or p | property owed to you? | | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | No | unds owed to you Give specific information ab | out them, inc | luding whether you alre | ady filed the returns and the tax years | |
| E | Examp No | support les: Past due or lump sum a | | usal support, child suppo | ort, maintenance, divorce settlement, property | settlement |
| = | Examp No | mounts someone owes y les: Unpaid wages, disabilit benefits; unpaid loans Give specific information | y insurance p | | efits, sick pay, vacation pay, workers' comper | nsation, Social Security |
| E | Examp No | Name the insurance compa | | | HSA); credit, homeowner's, or renter's insurar Beneficiary: | nce Surrender or refund value: |
| If s ■ | f you a comeo No | erest in property that is dare the beneficiary of a living ne has died. Give specific information | | | d surance policy, or are currently entitled to rece | eive property because |
| E | E <i>xamp</i> No | against third parties, whe les: Accidents, employment Describe each claim | | | t or made a demand for payment to sue | |
| | No | contingent and unliquidate Describe each claim | ed claims of | every nature, including | g counterclaims of the debtor and rights to | set off claims |
| | No | ancial assets you did not | already list | | | |
| 36. | Add tl | | | | ny entries for pages you have attached | \$7,300.00 |
| Part 5 | Des | scribe Any Business-Related | Property You | Own or Have an Interest I | n. List any real estate in Part 1. | |
| _ | - | own or have any legal or equit to Part 6. | able interest i | in any business-related p | roperty? | |

Official Form 106A/B Schedule A/B: Property page 4

 \square Yes. Go to line 38.

Case 18-04438 Doc 1 Filed 02/19/18 Entered 02/19/18 17:49:15 Desc Main Document Page 14 of 59 Case number (if known) Debtor 1 Miguel A. Ibarra Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 \$0.00 Part 2: Total vehicles, line 5 \$600.00 57. Part 3: Total personal and household items, line 15 \$2,500.00 Part 4: Total financial assets, line 36 \$7,300.00 59. Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00

\$10,400.00

Copy personal property total

Official Form 106A/B Schedule A/B: Property page 5

62. Total personal property. Add lines 56 through 61...

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$10,400.00

\$10,400.00

| | | | | J |
|---------------------|--------------------------|-------------------|-------------|---|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Miguel A. Ibarra | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | |
| | | | | |

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Part 1: | Identify the | Property You | Claim as | Exempt |
|---------|--------------|--------------|----------|--------|
|---------|--------------|--------------|----------|--------|

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Current value of the portion you own | Amo | ount of the exemption you claim | Specific laws that allow exemption | |
|--------------------------------------|----------------------------------|---|---|--|
| Copy the value from Schedule A/B | Che | ck only one box for each exemption. | | |
| \$600.00 | | \$600.00 | 735 ILCS 5/12-1001(c) | |
| | | 100% of fair market value, up to any applicable statutory limit | | |
| \$1,500.00 | | \$1,500.00 | 735 ILCS 5/12-1001(b) | |
| | | 100% of fair market value, up to any applicable statutory limit | | |
| \$1,000.00 | | \$1,000.00 | 735 ILCS 5/12-1001(a) | |
| | | 100% of fair market value, up to any applicable statutory limit | | |
| \$2,300.00 | | \$2,300.00 | 735 ILCS 5/12-1001(b) | |
| | | 100% of fair market value, up to any applicable statutory limit | | |
| \$5,000.00 | | \$5,000.00 | 735 ILCS 5/12-1006 | |
| | | 100% of fair market value, up to any applicable statutory limit | | |
| | \$1,500.00 \$1,000.00 \$2,300.00 | \$1,500.00 \$1,000.00 \$2,300.00 \$1,000 | Schedule A/B \$600.00 \$600.00 \$600.00 \$100% of fair market value, up to any applicable statutory limit \$1,500.00 \$1,000.00 \$1,000.00 \$1,000.00 \$1,000.00 \$1,000.00 \$2,300.00 \$2,300.00 \$2,300.00 \$5,000.00 \$5,000.00 \$1,00% of fair market value, up to any applicable statutory limit | |

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Debtor 1 Miguel A. Ibarra

3. Are you claiming a homestead exemption of more than \$160,375?
(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

No

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

No

Yes

| Fill in this infor | mation to identify your | case: | | |
|---------------------|--------------------------|-------------------|-------------|-----------------------|
| Debtor 1 | Miguel A. Ibarra | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | ☐ Check if this is an |
| | | | | amended filing |

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

| | | Document | Page 1 | 8 of 59 | |
|---|---|---|---|---|--|
| Fill in this info | rmation to identify your | case: | | | |
| Debtor 1 | Miguel A. Ibarra | | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States B | ankruptcy Court for the: | NORTHERN DISTRICT OF IL | LINOIS | | |
| Case number (if known) | | | | С | Check if this is an amended filing |
| Official For Schedule | | /ho Have Unsecured | Claims | | 12/15 |
| ny executory co schedule G: Exec schedule D: Cred eft. Attach the Co ame and case n | ntracts or unexpired leases cutory Contracts and Unexp litors Who Have Claims Sec | that could result in a claim. Also I ired Leases (Official Form 106G). I ured by Property. If more space is e. If you have no information to re | ist executory o Do not include needed, copy | Part 2 for creditors with NONPRIORITY contracts on Schedule A/B: Property (Cany creditors with partially secured clathe Part you need, fill it out, number the do not file that Part. On the top of any a | official Form 106A/B) and on aims that are listed in e entries in the boxes on the |
| | itors have priority unsecure | | | | |
| ■ No. Go to | Part 2. | • | | | |
| ☐ Yes. | | | | | |
| | All of Your NONPRIORIT | Y Unsecured Claims | | | |
| Yes. 4. List all of younsecured class | ur nonpriority unsecured cl aim, list the creditor separately | y for each claim. For each claim listed | ne creditor who | b holds each claim. If a creditor has more type of claim it is. Do not list claims alread three nonpriority unsecured claims fill ou | y included in Part 1. If more |
| rantz. | | | | | Total claim |
| | ed Bank | Last 4 digits of acc | ount number | 8223 | \$1,878.00 |
| Ро Во | x 17125 ngton, DE 19850 | When was the debt | incurred? | Opened 08/05 Last Active 12/17 | |
| | Street City State Zlp Code curred the debt? Check one. | As of the date you | file, the claim | s: Check all that apply | |
| Debt | or 1 only | ☐ Contingent | | | |
| ☐ Debt | or 2 only | ☐ Unliquidated | | | |
| ☐ Debt | or 1 and Debtor 2 only | ☐ Disputed | | | |
| ☐ At lea | ast one of the debtors and and | | RITY unsecure | d claim: | |
| debt | ck if this claim is for a com | ☐ Obligations arisir | | ration agreement or divorce that you did | not |
| | aim subject to offset? | report as priority clai | | | |
| ■ No | | • | · · | g plans, and other similar debts | |
| ☐ Yes | | Other. Specify | Credit Card | | |

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Case number (if know)

\$3,580.00 4.2 **Bank Of America** Last 4 digits of account number 4618 Nonpriority Creditor's Name Nc4-105-03-14 Opened 01/11 Last Active Po Box 26012 When was the debt incurred? 01/18 Greensboro, NC 27410 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes 4.3 **Capital One** Last 4 digits of account number 2149 \$1,399.00 Nonpriority Creditor's Name Attn: General Opened 05/00 Last Active Correspondence/Bankruptcy When was the debt incurred? 01/18 Po Box 30285 Salt Lake City, UT 84130 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes 4.4 \$403.00 **Capital One** Last 4 digits of account number 3157 Nonpriority Creditor's Name Opened 02/09 Last Active Attn: General Correspondence/Bankruptcy 01/18 When was the debt incurred? Po Box 30285 Salt Lake City, UT 84130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes

Debtor 1 Miguel A. Ibarra

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Case number (if know)

| Debtor | 1 Miguel A. Ibarra | | Case number (if know) | | | | |
|--------|--|--|---|------------|--|--|--|
| 4.5 | Capital One Nonpriority Creditor's Name | Last 4 digits of account number | 4377 | \$2,174.00 | | | |
| | Attn: General Correspondence/Bankruptcy Po Box 30285 | When was the debt incurred? | Opened 09/00 Last Active 01/18 | | | | |
| | Salt Lake City, UT 84130 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | | | | |
| | Debtor 1 only | ☐ Contingent | | | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | | | |
| | \square Check if this claim is for a community | Student loans | | | | | |
| | debt Is the claim subject to offset? | report as priority claims | aration agreement or divorce that you did not | | | | |
| | ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | | | | |
| | Yes | Other. Specify Credit Card | <u> </u> | | | | |
| 4.6 | Capital One Nonpriority Creditor's Name | Last 4 digits of account number | 0904 | \$2,170.00 | | | |
| | Attn: General Correspondence/Bankruptcy Po Box 30285 | When was the debt incurred? | Opened 12/04 Last Active 01/18 | | | | |
| | Salt Lake City, UT 84130 Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | | | | |
| | Who incurred the debt? Check one. | | | | | | |
| | Debtor 1 only | Contingent | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecure | d alaim. | | | | |
| | At least one of the debtors and another | Student loans | u Ciaiii. | | | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a sepa | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts | | | | |
| | ■ No | <u>-</u> ' ' | | | | | |
| | ☐ Yes | ■ Other. Specify Credit Card | | | | | |
| 47 | 0 %10 × N | | | * | | | |
| 4.7 | Capital One Na Nonpriority Creditor's Name | Last 4 digits of account number | | \$369.00 | | | |
| | Attn: General Correspondence/Bankruptcy Po Box 30285 | When was the debt incurred? | Opened 03/05 Last Active 01/18 | | | | |
| | Salt Lake City, UT 84130 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | | | | | |
| | Debtor 1 only | ☐ Contingent | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | Disputed | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | | | | | |
| | No | Debts to pension or profit-sharir | ng plans, and other similar debts | | | | |
| | Yes | | | | | | |
| | - 1€3 | ■ Other. Specify Credit Card | - | | | | |

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Case number (if know)

| Debioi | Wilguei A. Ibaira | | Case Humber (II know) | |
|--------|--|---|--|------------|
| 4.8 | Chusasears | Last 4 digits of account number | 5593 | \$2,809.00 |
| | Nonpriority Creditor's Name Citicorp Credit Srvs/Centralized Bankrup Po Box 790040 Spirit Levis MO 62470 | When was the debt incurred? | Opened 10/15 Last Active 11/17 | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | • • | |
| | Yes | Other. Specify Charge Acc | count | |
| 4.9 | Chase Card Services Nonpriority Creditor's Name | Last 4 digits of account number | 0811 | \$4,644.00 |
| | Attn: Correspondence Dept Po Box 15298 Wilmington, DE 19850 | When was the debt incurred? | Opened 11/12 Last Active 12/17 | |
| | Number Street City State Zlp Code As of the date you file, the clain Who incurred the debt? Check one. | | s: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans | | |
| | Is the claim subject to offset? | Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | Other. Specify Credit Card | <u> </u> | |
| 4.1 | Chase Card Services | Last 4 digits of account number | 7112 | \$559.00 |
| | Nonpriority Creditor's Name Attn: Correspondence Dept Po Box 15298 Wilmington DE 10850 | When was the debt incurred? | Opened 09/05 Last Active 01/18 | |
| | Wilmington, DE 19850 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | | ration agreement or divorce that you did not | |
| | No | report as priority claims Debts to pension or profit-sharin | g plans, and other similar debts | |
| | Yes | Other. Specify Credit Card | | |
| | 00 | - Other, Specify | • | |

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Debtor 1 Miguel A. Ibarra Case number (if know) 4.1 Citibak/Office Depot 1388 \$2,070.00 Last 4 digits of account number Nonpriority Creditor's Name Citicorp Credit Srvc/Centralized Opened 09/10 Last Active When was the debt incurred? Bankrup 11/17 Pob 790040 St Louis, MO 63179 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Charge Account 4.1 Citibank / Sears 1107 \$1,517.00 Last 4 digits of account number Nonpriority Creditor's Name Citicorp Credit Services/Attn: Opened 11/00 Last Active 11/17 Centraliz When was the debt incurred? Po Box 790040 Saint Louis, MO 63179 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes 4.1 Citibank North America 8151 \$1,168.00 Last 4 digits of account number 3 Nonpriority Creditor's Name Citicorp Credit Srvs/Centralized Opened 09/08 Last Active Bankrup When was the debt incurred? 12/17 Po Box 790040 Saint Louis, MO 63179 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes

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Debtor 1 Miguel A. Ibarra Case number (if know) 4.1 Citibank/Best Buy 0653 \$3,106.00 Last 4 digits of account number 4 Nonpriority Creditor's Name Citicorp Credit Srvs/Centralized Opened 9/02/08 Last Active When was the debt incurred? Bankrup 11/17 Po Box 790040 St. Louis, MO 63179 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Charge Account 4.1 Citibank/Sears 8217 \$1,277.00 Last 4 digits of account number Nonpriority Creditor's Name Citicorp Credit Srvs/Centalized Opened 11/00 Last Active When was the debt incurred? 3/14/16 **Bankrupt** Po Box 790040 St. Louis, MO 63179 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes 4.1 \$2,245.00 Citicards Cbna 8678 Last 4 digits of account number 6 Nonpriority Creditor's Name Citicorp Credit Svc/Centralized Opened 05/17 Last Active **Bankrupt** When was the debt incurred? 11/20/17 Po Box 790040 Saint Louis, MO 63179 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes

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Debtor 1 Miguel A. Ibarra Case number (if know) 4.1 Citicards Cbna 7558 \$1,810.00 Last 4 digits of account number Nonpriority Creditor's Name Citicorp Credit Svc/Centralized Opened 04/12 Last Active Bankrupt When was the debt incurred? 11/03/17 Po Box 790040 Saint Louis, MO 63179 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Credit Card 4.1 Comenity Bank/Carsons 5976 Last 4 digits of account number \$1,794.00 8 Nonpriority Creditor's Name Opened 10/00 Last Active Po Box 182125 When was the debt incurred? 01/18 Columbus, OH 43218 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Charge Account 4.1 First Premier Bank 4292 \$1.340.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 08/03 Last Active 601 S Minnesota Ave When was the debt incurred? 12/17 Sioux Falls, SD 57104 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only □ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No \square Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Credit Card** Other. Specify

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Debtor 1 Miguel A. Ibarra Case number (if know) 4.2 **First Premier Bank** 1104 \$798.00 Last 4 digits of account number 0 Nonpriority Creditor's Name Opened 12/14 Last Active Po Box 5524 When was the debt incurred? 12/17 Sioux Falls, SD 57117 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Credit Card** Other. Specify 4.2 Kohls/Capital One 2102 \$847.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 09/12 Last Active **Kohls Credit** Po Box 3043 When was the debt incurred? 12/17 Milwaukee, WI 53201 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes 4.2 OneMain Financial \$1.737.00 3467 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Department Opened 06/16 Last Active 601 Nw 2nd St #300 When was the debt incurred? 01/18 Evansville, IN 47708 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Secured

Official Form 106 E/F

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Debtor 1 Miguel A. Ibarra Case number (if know) 4.2 Syncb/hhgreg 9317 \$9,028.00 Last 4 digits of account number 3 Nonpriority Creditor's Name Attn: Bankruptcy Opened 11/11 Last Active Po Box 965060 When was the debt incurred? 12/17 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes 4.2 Syncb/PLCC 3127 \$736.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Opened 03/96 Last Active When was the debt incurred? Po Box 965060 12/17 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes 4.2 Synchrony Bank/ JC Penney 7803 \$8,659.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 07/16 Last Active Attn: Bankruptcy Po Box 965060 When was the debt incurred? 11/17 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes

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Debtor 1 Miguel A. Ibarra Case number (if know) 4.2 Synchrony Bank/ JC Penneys 3975 \$4,213.00 Last 4 digits of account number 6 Nonpriority Creditor's Name Attn: Bankruptcy Opened 11/13 Last Active Po Box 965060 When was the debt incurred? 12/17 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes 4.2 Synchrony Bank/Walmart 5518 \$5,528.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Opened 03/14 Last Active Po Box 965060 When was the debt incurred? 11/17 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes 4.2 Tnb-Visa (TV) / Target 7142 \$5,932.00 Last 4 digits of account number 8 Nonpriority Creditor's Name Opened 09/95 Last Active C/O Financial & Retail Services Mailstop BV PO Box 9475 When was the debt incurred? 11/17 Minneapolis, MN 55440 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes

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Case number (if know)

| Visa Dept Store National Bank/Macy's | Last 4 digits of account number | 6860 | \$1,892.00 | | | |
|---|--|---|------------|--|--|--|
| Nonpriority Creditor's Name Attn: Bankruptcy Po Box 8053 Mason, OH 45040 | When was the debt incurred? | Opened 02/15 Last Active 12/17 | | | | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | As of the date you file, the claim is: Check all that apply | | | | |
| ■ Debtor 1 only | ☐ Contingent | | | | | |
| ☐ Debtor 2 only | ☐ Unliquidated | | | | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | | |
| ☐ Check if this claim is for a community | ☐ Student loans | | | | | |
| debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | | | | |
| ■ No | ☐ Debts to pension or profit-sharin | g plans, and other similar debts | | | | |
| Yes | Other. Specify Charge Acc | count | | | | |
| Visa Dept Store National Bank/Macy's | Last 4 digits of account number | 9559 | \$734.00 | | | |
| Nonpriority Creditor's Name Attn: Bankruptcy Po Box 8053 | When was the debt incurred? | Opened 05/17 Last Active | | | | |
| Mason, OH 45040 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | | | | |
| Debtor 1 only | Пол | | | | | |
| | ☐ Contingent | | | | | |
| Debtor 2 only | ☐ Unliquidated | | | | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecure | d claim: | | | | |
| At least one of the debtors and another | ☐ Student loans | a ciaiii. | | | | |
| ☐ Check if this claim is for a community debt | | aration agreement or divorce that you did not | | | | |
| Is the claim subject to offset? | report as priority claims | nation agreement of arrefee that you are not | | | | |
| ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | | | |
| Yes | Other. Specify Charge Acc | count | | | | |
| Wells Fargo Financia | Last 4 digits of account number | 0959 | \$1,587.00 | | | |
| Nonpriority Creditor's Name | | | | | | |
| Po Box 94498 Las Vegas, NV 89193 | When was the debt incurred? | Opened 08/15 Last Active 11/17 | | | | |
| Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | | | | |
| Who incurred the debt? Check one. | | | | | | |
| Debtor 1 only | ☐ Contingent | | | | | |
| Debtor 2 only | ☐ Unliquidated | | | | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | | |
| ☐ Check if this claim is for a community | ☐ Student loans | | | | | |
| debt | Obligations arising out of a sepa | aration agreement or divorce that you did not | | | | |
| Is the claim subject to offset? | report as priority claims | | | | | |
| No | Debts to pension or profit-sharing | | | | | |
| Yes | Other. Specify Charge Acc | count | | | | |
| | · · · · · · · · · · · · · · · · · · · | · · · · · · · · · · · · · · · · · · · | | | | |

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you

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Debtor 1 Miguel A. Ibarra

Case number (if know)

have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | | 7 | otal Claim |
|-----------------------|-----|---|-----|----------|------------|
| | 6a. | Domestic support obligations | 6a. | \$ | 0.00 |
| Total | | | | <u> </u> | |
| claims from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ | 0.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ | 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ | 0.00 |
| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ | 0.00 |
| | | | | 7 | otal Claim |
| | 6f. | Student loans | 6f. | \$ | 0.00 |
| Total claims | | | | | |
| from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ | 0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ | 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ | 78,003.00 |
| | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ | 78,003.00 |

| | | | ill I auc 30 of 33 | |
|---|-------------------------|-------------------|--------------------|--|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Miguel A. Ibarra | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Bankruptcy Court for the: | | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | |
| | | | | |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or | company with | whom you have the r, Street, City, State and ZIP C | contract or lease | State what the contract or lease is for |
|-----|-----------|--------------|---|-------------------|---|
| 2.1 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.2 | | | | | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.3 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.4 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.5 | | | | | _ |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| | | | | | |

| | | Docume | ent Page 31 d | of 59 | |
|---------------------------|---------------------------------|---|--------------------------|---|----------------|
| Fill in this | information to identify your | case: | | | |
| Debtor 1 | Miguel A. Ibarra | | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | First Name | Middle News | Last Name | | |
| (Spouse if, filir | ng) First Name | Middle Name | Last Name | | |
| United Sta | tes Bankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| Case numl | ber | | | | |
| (if known) | | | | ☐ Check if this is an | |
| | | | | amended filing | |
| Official | Form 106H | | | | |
| | I Form 106H | 1.4 | | | |
| Sched | lule H: Your Cod | ebtors | | 12/15 | ; |
| ■ No □ Yes 2. With | | lived in a community pr | operty state or territor | ry? (Community property states and territories include | |
| | s. Did your spouse, former spou | ise or legal equivalent live | with you at the time? | | |
| □ 163 | s. Dia your spouse, former spot | ise, or legal equivalent live | e with you at the time: | | |
| in line Form out Co | 2 again as a codebtor only i | f that person is a guaran Form 106E/F), or Sched | tor or cosigner. Make | r if your spouse is filing with you. List the person sho sure you have listed the creditor on Schedule D (Offic 16G). Use Schedule D, Schedule E/F, or Schedule G to Column 2: The creditor to whom you owe the del Check all schedules that apply: | cial o fill |
| 0.4 | | | | Contrada D. Fra | |
| 3.1 | Name | | | □ Schedule D, line □ Schedule E/F, line | |
| | | | | ☐ Schedule G, line | |
| _ | Number Street | | | | |
| | Number Street City | State | ZIP Code | | |
| | | | | | |
| 3.2 | | | | Cohodulo D. lino | |
| | Name | | | □ Schedule D, line □ Schedule E/F, line | |
| | | | | ☐ Schedule G, line | |
| - | Number Street | | | | |
| | City | State | ZIP Code | | |

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| Eill | in this information to identify your o | 2000 | | | | | | | | |
|----------------------------|--|--|---|-----------------------|-----------------|-----------------------------|---------------------|--|------------------------|------------------------|
| | otor 1 Miguel A. Ik | | | | | | | | | |
| | otor 2 | | | | | | | | | |
| Uni | ted States Bankruptcy Court for the | e: NORTHERN DISTRIC | CT OF ILLINOIS | | | | | | | |
| (If kr | se number | | | | | | mended opleme | d filing nt showing p s of the follo | | |
| | fficial Form 106l | | | | | MM / | DD/ Y | YYY | | |
| Be a sup spo atta | chedule I: Your Inc. as complete and accurate as posplying correct information. If you use. If you are separated and you che a separate sheet to this form. t1: Describe Employment | sible. If two married peo are married and not filin ur spouse is not filing wi On the top of any additi | ng jointly, and your sith you, do not include | spouse i de inforr | s livi natio | ing with you on about yo | ı, İnclu ur spoı | de informa use. If more | ition abo e space i | out your is needed, |
| 1. | Fill in your employment information. | | Debtor 1 | | | De | ebtor 2 | or non-filin | ng spous | se |
| | If you have more than one job, | | ■ Employed | | | | Emplo | | 0 1 | |
| | attach a separate page with information about additional | Employment status | ☐ Not employed | | | | Not em | nployed | | |
| | employers. | Occupation | Purchasing Cle | rk | | | | | | |
| | Include part-time, seasonal, or self-employed work. | Employer's name | The Hyatt Lodge | 9 | | | | | | |
| | Occupation may include student or homemaker, if it applies. | Employer's address | 2815 Jorie Road Oak Brook, IL 6 | | | | | | | |
| | | How long employed to | here? 15 year | s | | | | | | |
| Pai | t 2: Give Details About Mo | nthly Income | | | | | | | | |
| | mate monthly income as of the cuse unless you are separated. | date you file this form. If | you have nothing to re | eport for | any I | ine, write \$0 | in the s | space. Inclu | de your r | non-filing |
| | u or your non-filing spouse have me space, attach a separate sheet to | | ombine the information | n for all e | mplo | oyers for that | persor | on the line | s below. | If you need |
| | | | | | | For Debtor | 1 | For Debto | | • |
| 2. | List monthly gross wages, sala deductions). If not paid monthly, | | | 2. | \$ | 3,14 | 1.26 | \$ | N/ | <u>A</u> |
| 3. | Estimate and list monthly over | time pay. | | 3. | +\$ | | 0.00 | +\$ | N/ | <u>A</u> |

Calculate gross Income. Add line 2 + line 3.

4. **\$ 3,141.26**

N/A

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| Deb | tor 1 | Miguel A. Ibarra | = | C | ase n | number (if ki | nown) | | | | |
|-----|--|---|----------|----------------|---------|---------------|-------|-----------|--------------------|-------------------------|------------|
| | | | | | | Debtor 1 | | non- | Debtor filing s | spouse | |
| | Cop | by line 4 here | 4. | | \$ | 3,14 | 1.26 | \$ | | N/A | <u>\</u> |
| 5. | List | all payroll deductions: | | | | | | | | | |
| | 5a. | Tax, Medicare, and Social Security deductions | 5a | ۱. | \$ | 643 | 3.88 | \$ | | N/A | ١ |
| | 5b. | Mandatory contributions for retirement plans | 5b |). | \$ | | 0.00 | \$ | | N/A | <u> </u> |
| | 5c. | Voluntary contributions for retirement plans | 5c | : . | \$ | 188 | 3.47 | \$ | | N/A | <u>\</u> |
| | 5d. | Required repayments of retirement fund loans | 5d | l. | \$ | | 0.00 | \$ | | N/A | |
| | 5e. | Insurance | 5e | | \$ | | 0.60 | \$ | | N/A | _ |
| | 5f. | Domestic support obligations | 5f. | | \$ | | 0.00 | \$ | | N/A | |
| | 5g. 5h. | Union dues Other deductions. Specify: | 5g 5h | | » \$ | | 0.00 | * + \$ | | N/A | _ |
| • | | · · · · · · · · · · · · · · · · · · · | _ | | · — | | | · : — | | | _ |
| 6. | | I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | | \$ | 1,012 | | \$ | | N/A | _ |
| 7. | | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | | \$ | 2,128 | 3.31 | \$ | | N/A | <u>\</u> |
| 8. | List 8a. | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 8a | 1. | \$ | | 0.00 | \$ | | N/A | A |
| | 8b. | Interest and dividends | 8b | | \$ | | 0.00 | \$ | | N/A | |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 8c | | \$ | | 0.00 | \$ | | N/A | |
| | 8d. | Unemployment compensation | 8d | | \$ | | 0.00 | \$ | | N/A | |
| | 8e. | Social Security | 8e |) . | \$ | | 0.00 | \$ | | N/A | <u>\</u> |
| | 8f. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | 8f. | | \$ | | 0.00 | \$ | | N/A | |
| | 8g. | Pension or retirement income | 8g | , | \$ | | 0.00 | \$ | | N/A | |
| | 8h. | Other monthly income. Specify: | _ 8h | 1.+ | \$ | | 0.00 | + \$ | | N/A | <u>\</u> |
| 9. | Add | d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ | | | 0.00 | \$ | | N/ | ' A |
| 10. | Cal | culate monthly income. Add line 7 + line 9. | 10. | \$ | 2 | 2,128.31 | + \$ | | N/A | = \$ | 2,128.31 |
| | | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | | Ť- | | ., 120.01 | | | 14// | * - | 2,120.01 |
| 11. | State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. | | | | | | | | | 0.00 | |
| 12. | 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies | | | | | | | | 12. | \$ | 2,128.31 |
| 13. | 3. Do you expect an increase or decrease within the year after you file this form? | | | | | | | | | Combined monthly income | |
| | | No. | | | | | | | | | |
| | | Voc Evoloin: | | | | | | | | | I |

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| -رسي | in the in Cour | tion to identify | | | | 1 | | | | | |
|---|---|--|------------------------|---|--|----------------------------|---|---|--|--|--|
| FIII | in this informa | tion to identify yo | our case: | | | | | | | | |
| Deb | tor 1 | Miguel A. Iba | arra | | | | k if this is: | | | | |
| Deb | tor 2 | | | | | _ | An amended filing A supplement shov | ving postpetition chapter | | | |
| (Spo | ouse, if filing) | | | | | | | the following date: | | | |
| United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS | | | | | | | MM / DD / YYYY | | | | |
| | e number nown) | | | | | | | | | | |
| Of | fficial Fo | rm 106J | | | | • | | | | | |
| Sc | chedule | J: Your l | Exper | nses | | | | 12/15 | | | |
| Be a | as complete a | and accurate as | possible eded, atta | . If two married people ar ich another sheet to this | | | | | | | |
| Par | | ibe Your House | hold | | | | | | | | |
| 1. | Is this a joir | | | | | | | | | | |
| | ■ No. Go to | | n a conar | ate household? | | | | | | | |
| | | | ii a sepai | ate nousenoid? | | | | | | | |
| | □ No□ Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. | | | | | | | | | | |
| 2. | Do you have dependents? ■ No | | | | | | | | | | |
| | Do not list Do Debtor 2. | ebtor 1 and | ☐ Yes. | Fill out this information for each dependent | Dependent's relat Debtor 1 or Debto | | Dependent's age | Does dependent live with you? | | | |
| | Do not state | the | | | | | | □ No | | | |
| | dependents | names. | | | | | | Yes | | | |
| | | | | | | | | □ No | | | |
| | | | | | | | | □ Yes □ No | | | |
| | | | | | | | | ☐ Yes | | | |
| | | | | | - | | · | □ No | | | |
| | | | | | | | | ☐ Yes | | | |
| 3. | | enses include | | No | | | | | | | |
| | | f people other ti d your depende | | Yes | | | | | | | |
| | | | | | | | | | | | |
| exp | imate your ex | ate Your Ongoing the Market American American (Appenses as of your and after the Market American (Appense) and the Market American (Appense) a | our bankr | y Expenses uptcy filing date unless y y is filed. If this is a supp | ou are using this followed lemental Schedule | orm as a su J, check th | pplement in a Cha e box at the top o | apter 13 case to report f the form and fill in the | | | |
| the | value of such | n assistance an | | government assistance it | | | Your exp | enses | | | |
| וזטן | ficial Form 10 | юі.) | | | | | i cui exp | 500 | | | |
| 4. | | or home owners and any rent for the | | ses for your residence. In | nclude first mortgag | e 4. \$ | | 850.00 | | | |
| | If not includ | led in line 4: | | | | | | | | | |
| | 4a. Real e | estate taxes | | | | 4a. \$ | | 0.00 | | | |
| | 4b. Prope | rty, homeowner's | s, or renter | 's insurance | | 4b. \$ | | 0.00 | | | |
| | | | | ipkeep expenses | | 4c. \$ | | 0.00 | | | |
| 5 | | owner's associat | | dominium dues our residence , such as ho | me equity loops | 4d. \$ 5. \$ | | 0.00 | | | |
| J. | AUUILIUIIAI I | | anta IUI V(| zur rearuente, such as no | ne econy idalis | J. D | | 11 1111 | | | |

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| Debtor 1 Miguel A. Ibarra | Case number (if known) | | | | | | |
|--|--------------------------------|--|--|--|--|--|--|
| 6. Utilities: | | | | | | | |
| 6a. Electricity, heat, natural gas | 6a. \$ | | | | | | |
| 6b. Water, sewer, garbage collection | 6b. \$ | | | | | | |
| 6c. Telephone, cell phone, Internet, satellite, and cable services | 6c. \$ 15 | | | | | | |
| 6d. Other. Specify: | 6d. \$ | | | | | | |
| Food and housekeeping supplies | | | | | | | |
| . • | | | | | | | |
| | | | | | | | |
| Clothing, laundry, and dry cleaning | 9. \$ | | | | | | |
|). Personal care products and services | 10. \$10 | | | | | | |
| Medical and dental expenses | 11. \$ 4 | | | | | | |
| 2. Transportation. Include gas, maintenance, bus or train fare. | 12. \$ 20 | | | | | | |
| Do not include car payments. | ·=· • | | | | | | |
| 3. Entertainment, clubs, recreation, newspapers, magazines, and book | | | | | | | |
| 4. Charitable contributions and religious donations | 14. \$ | | | | | | |
| 5. Insurance. | 00 | | | | | | |
| Do not include insurance deducted from your pay or included in lines 4 or | | | | | | | |
| 15a. Life insurance | 15a. \$ | | | | | | |
| 15b. Health insurance | 15b. \$ | | | | | | |
| 15c. Vehicle insurance | 15c. \$11 | | | | | | |
| 15d. Other insurance. Specify: | 15d. \$ (| | | | | | |
| 6. Taxes. Do not include taxes deducted from your pay or included in lines 4 | | | | | | | |
| Specify: | 16. \$ | | | | | | |
| 7. Installment or lease payments: | • | | | | | | |
| 17a. Car payments for Vehicle 1 | 17a. \$ | | | | | | |
| 17b. Car payments for Vehicle 2 | 17b. \$ | | | | | | |
| 17c. Other. Specify: | 17c. \$ | | | | | | |
| 17d. Other. Specify: | 17d. \$ | | | | | | |
| 3. Your payments of alimony, maintenance, and support that you did n | ot report as | | | | | | |
| deducted from your pay on line 5, Schedule I, Your Income (Official I | | | | | | | |
| Other payments you make to support others who do not live with yo | J. \$ | | | | | | |
| Specify: | 19. | | | | | | |
| Other real property expenses not included in lines 4 or 5 of this form | or on Schedule I: Your Income. | | | | | | |
| 20a. Mortgages on other property | 20a. \$ | | | | | | |
| 20b. Real estate taxes | 20b. \$ | | | | | | |
| 20c. Property, homeowner's, or renter's insurance | 20c. \$ | | | | | | |
| 20d. Maintenance, repair, and upkeep expenses | 20d. \$ | | | | | | |
| 20e. Homeowner's association or condominium dues | 20e. \$ | | | | | | |
| I. Other: Specify: | 21. +\$ | | | | | | |
| | 'Ψ | | | | | | |
| 2. Calculate your monthly expenses | | | | | | | |
| 22a. Add lines 4 through 21. | \$ 2,100.0 | | | | | | |
| 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Fo | rm 106J-2 \$ | | | | | | |
| 22c. Add line 22a and 22b. The result is your monthly expenses. | \$ 2,100.0 | | | | | | |
| 220. Add into 220 drid 220. The result to your monthly experieds. | | | | | | | |
| 3. Calculate your monthly net income. | | | | | | | |
| 23a. Copy line 12 (your combined monthly income) from Schedule I. | 23a. \$ 2,12 | | | | | | |
| 23b. Copy your monthly expenses from line 22c above. | 23b\$ 2,10 | | | | | | |
| | | | | | | | |
| 23c. Subtract your monthly expenses from your monthly income. | | | | | | | |
| The result is your monthly net income. | 23c. \$ 2 6 | | | | | | |
| • • | | | | | | | |
| 4. Do you expect an increase or decrease in your expenses within the | | | | | | | |
| or example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of | | | | | | | |
| modification to the terms of your mortgage? | | | | | | | |
| ■ No | | | | | | | |
| ☐ Yes. Explain here: | | | | | | | |

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| Fill in this informa | ation to identify your | case: | tille flags section | | |
|---------------------------------|---|------------------------------|-------------------------------|--|-------------|
| Debtor 1 | Miguel A. Ibarra | Middle None | Last Name | | |
| Dahtar 2 | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Ban | kruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| Case number | | | | | |
| (if known) | | | | Check if this is amended filing | |
| | | | | amonded iiii | 9 |
| | | | | | |
| Official Form | 106Dec | | | | |
| | | n Individua | Debtor's Sch | nedules | 12/15 |
| Declarati | OII ADOUL 8 | all illaiviada | DODIO! O GO! | 1000.00 | |
| If two married peo | ople are filing togethe | r, both are equally response | onsible for supplying corre | ect information. | |
| V | form whomover you | ile hankruntev schedule | es or amended schedules. | Making a false statement, concealing prop | erty, or |
| obtaining money | or property by fraud i | n connection with a ban | kruptcy case can result in | fines up to \$250,000, or imprisonment for | up to 20 |
| years, or both. 18 | U.S.C. §§ 152, 1341, | 1519, and 3571. | | | |
| | | | | | |
| Sign | Below | | | | |
| D: I | | anna who is NOT an atto | orney to help you fill out ba | inkruptcy forms? | |
| Did you pay | or agree to pay some | eone who is NOT an acc | officy to help you in our se | aproy | |
| ■ No | | | | | |
| □ Yes N | lame of person | | | Attach Bankruptcy Petition Preparer | 's Notice, |
| | | | | Declaration, and Signature (Official | Form 119) |
| | | | | | |
| Under penal | Ity of perjury, I declare true and correct. | e that I have read the su | mmary and schedules filed | I with this declaration and | |
| that they are | gel a. d | | X | | |
| Miguel | | 70 0000 | Signature of I | Debtor 2 | |
| Signatur | re of Debtor 1 | | | | |
| Date | 02-16- | 2018 | Date | | |
| Miguel Signatur | A. Ibarra re of Debtor 1 | | | Debtor 2 | |
| Date _ | 02-16- | 2010 | | | |

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| -811 | in this inform | nation to identify you | r c250: | | | | | |
|--------------------|--|--|---|---|---|---|--|--|
| | | nation to identify you | i case. | | | | | |
| Det | otor 1 | Miguel A. Ibarra | Middle Name | Last Name | | | | |
| | otor 2 | First Name | Middle Nove | Lost Nama | | | | |
| | use if, filing) | First Name | Middle Name | Last Name | | | | |
| Uni | ted States Bar | hkruptcy Court for the: | NORTHERN DISTRICT (| OF ILLINOIS | | | | |
| | se number | | | | _ | Check if this is an mended filing | | |
| Sta | s complete a | of Financial | | are filing together, both are | ankruptcy equally responsible for sup | | | |
| num | ber (if known |). Answer every que | stion. | · | , , , | | | |
| Par 1. | | etails About Your Ma | arital Status and Where You | I Lived Before | | | | |
| •• | | Carrent maritar state | | | | | | |
| | ■ Married■ Not mar | ried | | | | | | |
| 2. | During the la | g the last 3 years, have you lived anywhere other than where you live now? | | | | | | |
| | NoYes. List all of the places you lived in the last 3 years. Do not include where you live now. | | | | | | | |
| | Debtor 1 Pri | or Address: | Dates Debtor 1 lived there | Debtor 2 Prior Ad | dress: | Dates Debtor 2 lived there | | |
| 3. state | | | | | ity property state or territory ico, Texas, Washington and W | | | |
| | ■ No □ Yes. Ma | ke sure you fill out <i>Scl</i> | hedule H: Your Codebtors (O | fficial Form 106H). | | | | |
| Par | t 2 Explain | n the Sources of You | r Income | | | | | |
| 4. | Fill in the tota | I amount of income yo | nployment or from operating u received from all jobs and a have income that you receive | all businesses, including part- | | ndar years? | | |
| | □ No | | | | | | | |
| | Yes. Fill | in the details. | | | | | | |
| | | | Debtor 1 | | Debtor 2 | | | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | | |
| | | of current year until d for bankruptcy: | ■ Wages, commissions, bonuses, tips | \$3,670.95 | ☐ Wages, commissions, bonuses, tips | | | |
| | | | ☐ Operating a business | | ☐ Operating a business | | | |

Official Form 107

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Case number (if known) Miguel A. Ibarra Debtor 1 **Debtor 1** Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) For last calendar year: \$64,620.00 □ Wages, commissions, Wages, commissions, (January 1 to December 31, 2017) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business For the calendar year before that: \$63,000.00 ■ Wages, commissions, Wages, commissions, (January 1 to December 31, 2016) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony, child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Nο Yes. Fill in the details. Debtor 2 Debtor 1 Sources of income **Gross income from** Sources of income **Gross income** Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? □ No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7.

☐ Yes

List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Creditor's Name and Address Amount you Dates of payment Total amount Was this payment for ... still owe paid

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Case number (if known) Debtor 1 Miguel A. Ibarra

| Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corpus of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider. | | | | al partner; corporations gent, including one for | | | |
|---|--|---------------------------------------|----------------------|---|--------------------|-----------------------|--|
| | Insider's Name and Address | Dates of payment | Total amount | Amount you | Pageon for | this payment | |
| | insider 5 Name and Address | Dates of payment | paid | Amount you still owe | Neason for | uns payment | |
| 8. | Within 1 year before you filed for bankruptor insider? Include payments on debts guaranteed or cos No Yes. List all payments to an insider | | ments or transfer | any property on a | ccount of a d | ebt that benefited an | |
| | Insider's Name and Address | Dates of payment | Total amount | Amount you | | this payment | |
| | | | paid | still owe | Include cred | litor's name | |
| Pai | t 4: Identify Legal Actions, Repossession | ns, and Foreclosures | | | | | |
| 9. | Within 1 year before you filed for bankruptor. List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details. | | | | | | |
| | Case title | Nature of the case | Court or agency | | Status of th | ie case | |
| | Case number | | | | | | |
| 10. | Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. | | | | | | |
| | Creditor Name and Address | Describe the Property | | Date | | Value of the | |
| | | Explain what happened | 1 | | | property | |
| 11. | Within 90 days before you filed for bankrup accounts or refuse to make a payment bec No Yes. Fill in the details. | otcy, did any creditor, incl | | nancial institution | , set off any a | amounts from your | |
| | Creditor Name and Address | Describe the action the creditor took | | | action was | Amount | |
| | Within 1 year before you filed for bankrupte court-appointed receiver, a custodian, or a No Yes | | erty in the possess | taken | | efit of creditors, a | |
| Pai | List Certain Gifts and Contributions | | | | | | |
| 13. | Within 2 years before you filed for bankrup■ No□ Yes. Fill in the details for each gift. | tcy, did you give any gifts | s with a total value | of more than \$60 | 0 per person | ? | |
| | Gifts with a total value of more than \$600 per person | Describe the gifts | | Dates the gi | s you gave ifts | Value | |
| | Person to Whom You Gave the Gift and Address: | | | | | | |

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| 14. | Within 2 years before you filed for bankr ■ No □ Yes. Fill in the details for each gift or o | | , , , , , | ns with a total | value of more than | \$600 to any charity? | |
|-----|--|-------------|--|-----------------|---|---------------------------|--|
| | Gifts or contributions to charities that is more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Cod | | Describe what you contributed | | Dates you contributed | Value | |
| Par | t 6: List Certain Losses | | | | | | |
| 15. | Within 1 year before you filed for bankru or gambling? | iptcy or | since you filed for bankruptcy, did y | ou lose anytl | ning because of thef | t, fire, other disaster | |
| | ■ No □ Yes. Fill in the details. | | | | | | |
| | Describe the property you lost and how the loss occurred | Include | be any insurance coverage for the lot the amount that insurance has paid. Lot claims on line 33 of Schedule A/B: | ist pending | Date of your loss | Value of property lost | |
| Par | t 7: List Certain Payments or Transfer | s | | | | | |
| 16. | Within 1 year before you filed for bankru consulted about seeking bankruptcy or Include any attorneys, bankruptcy petition process. No Yes. Fill in the details. | preparir | ng a bankruptcy petition? s, or credit counseling agencies for ser | vices required | in your bankruptcy. | | |
| | Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not N | ′ ou | Description and value of any prop transferred | erty | Date payment or transfer was made | Amount of payment | |
| | Thayer C. Torgerson 2400 North Western Avenue Chicago, IL 60647 ted@tedtorgersonlaw.com | | | | 2/16/18 | \$1,265.00 | |
| 17. | Within 1 year before you filed for bankru promised to help you deal with your cree Do not include any payment or transfer that | ditors o | r to make payments to your creditor | | r transfer any prope | rty to anyone who | |
| | ■ No □ Yes. Fill in the details. | | | | | | |
| | Person Who Was Paid Address | | Description and value of any prop transferred | erty | Date payment or transfer was made | Amount of payment | |
| 18. | Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details. | | | | | | |
| | Person Who Received Transfer Address Person's relationship to you | | Description and value of property transferred | | ny property or received or debts change | Date transfer was made | |
| | . c.com o relationally to you | | | | | | |

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Miguel A. Ibarra Debtor 1

| 19. | Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No | | | | | | |
|-----|--|--|-------------------|-------------|--|---------------------------------|-------|
| | ☐ Yes. Fill in the details. | | | | | | |
| | Name of trust | Description and v | alue of the pro | perty trans | sferred | Date Transfer made | r was |
| Par | t 8: List of Certain Financial Accounts, Instr | ruments, Safe Deposit | Boxes, and St | orage Unit | s | | |
| 20. | Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associated to the cooperative of the cooperati | other financial accou | nts; certificates | of deposi | | | |
| | NoYes. Fill in the details. | | | | | | |
| | | Last 4 digits of account number | Type of acco | unt or | Date account was closed, sold, moved, or transferred | Last bal before closi tra | |
| 21. | Do you now have, or did you have within 1 ye cash, or other valuables? | ar before you filed for | bankruptcy, a | ny safe dep | oosit box or other depos | sitory for securit | ies, |
| | ■ No □ Yes. Fill in the details. | | | | | | |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had acc Address (Number, S State and ZIP Code) | | Describe | the contents | Do you still have it? | I |
| 22. | Have you stored property in a storage unit or | place other than your | home within 1 | year befor | re you filed for bankrupt | cy? | |
| | ■ No □ Yes. Fill in the details. | | | | | | |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | Who else has or h to it? Address (Number, S State and ZIP Code) | | Describe | the contents | Do you still have it? | I |
| Par | t 9: Identify Property You Hold or Control fo | or Someone Else | | | | | |
| 23. | Do you hold or control any property that some for someone. | eone else owns? Inclu | ude any proper | ty you bori | rowed from, are storing | for, or hold in tr | ust |
| | ■ No □ Yes. Fill in the details. | | | | | | |
| | Owner's Name Address (Number, Street, City, State and ZIP Code) | Where is the prop (Number, Street, City, S Code) | | Describe | the property | ` | Value |
| Par | t 10: Give Details About Environmental Inform | mation | | | | | |
| For | the purpose of Part 10, the following definition | ns apply: | | | | | |
| | Environmental law means any federal, state, of toxic substances, wastes, or material into the regulations controlling the cleanup of these s | air, land, soil, surface | e water, ground | | | | us or |
| | Site means any location, facility, or property a | as defined under any e | environmental l | aw, wheth | er you now own, operat | e, or utilize it or | used |

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

to own, operate, or utilize it, including disposal sites.

hazardous material, pollutant, contaminant, or similar term.

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Debtor 1 Miguel A. Ibarra

| 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No | | | | | | | | |
|--|---|--|--|--------------------|--|--|--|--|
| | Yes. Fill in the details. | | | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | Environmental law, if you know it | Date of notice | | | | |
| 25. | Have you notified any governmental unit of any | release of hazardous material? | | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | Environmental law, if you know it | Date of notice | | | | |
| 26. | Have you been a party in any judicial or adminis | strative proceeding under any envir | onmental law? Include settlements a | nd orders. | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | |
| | Case Title Case Number | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Nature of the case | Status of the case | | | | |
| Par | 11: Give Details About Your Business or Con | nections to Any Business | | | | | | |
| 27. | Within 4 years before you filed for bankruptcy, o | did you own a business or have any | of the following connections to any | business? | | | | |
| | ☐ A sole proprietor or self-employed in a t | rade, profession, or other activity, e | either full-time or part-time | | | | | |
| | ☐ A member of a limited liability company | (LLC) or limited liability partnership | (LLP) | | | | | |
| | ☐ A partner in a partnership | | | | | | | |
| | ☐ An officer, director, or managing executive of a corporation | | | | | | | |
| | ☐ An owner of at least 5% of the voting or equity securities of a corporation | | | | | | | |
| | ■ No. None of the above applies. Go to Part 12. | | | | | | | |
| | Yes. Check all that apply above and fill in the | he details below for each business. | | | | | | |
| | Business Name De Address | scribe the nature of the business | Employer Identification number Do not include Social Security n | | | | | |
| | | me of accountant or bookkeeper | Dates business existed | • | | | | |
| 28. | Within 2 years before you filed for bankruptcy, of institutions, creditors, or other parties. | did you give a financial statement to | anyone about your business? Inclu | de all financial | | | | |
| | ■ No □ Yes. Fill in the details below. | | | | | | | |
| | Name Address (Number, Street, City, State and ZIP Code) | | | | | | | |
| | | | | | | | | |

| Debtor 1 | Miguel A. Ibarra | Document | Page 43 of | number (if known) | |
|----------|---|--|----------------------|---|---|
| | | | | der er in violation of an anviron | mental law? |
| . Has | s any governmental unit notified you tha | at you may be liable or pot | entially liable un | ider or in violation of an environ | mentariaw: |
| | No | | | | |
| | Yes. Fill in the details. | | | | |
| | nme of site ddress (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Str ZIP Code) | | Environmental law, if you know it | Date of notice |
| 5. Hav | ve you notified any governmental unit o | of any release of hazardous | s material? | | |
| 100 | N- | | | | |
| | No Yes. Fill in the details. | | | | |
| Na | ame of site ddress (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Str ZIP Code) | | Environmental law, if you know it | Date of notice |
| 6. Ha | ve you been a party in any judicial or ad | dministrative proceeding u | ınder any enviro | nmental law? Include settlemen | ts and orders. |
| and a | No | | | | |
| | Yes. Fill in the details. | | | | |
| c | ase Title ase Number | Court or agency Name Address (Number, St State and ZIP Code) | | Nature of the case | Status of the case |
| | Give Details About Your Business o | | | | |
| | ☐ A sole proprietor or self-employed☐ A member of a limited liability con☐ A partner in a partnership | | | | |
| | | avacutive of a corporation | | | |
| | ☐ An officer, director, or managing of | | | | |
| | ☐ An owner of at least 5% of the vot | ting or equity securities of | a corporation | | |
| | No. None of the above applies. Go to | | | | |
| | Yes. Check all that apply above and | fill in the details below for | each business. | | |
| 100 | Business Name | Describe the nature of | the business | Employer Identification nur Do not include Social Secu | nber rity number or ITIN. |
| | Number, Street, City, State and ZIP Code) | Name of accountant o | r bookkeeper | Dates business existed | |
| 28. W | Vithin 2 years before you filed for bankrunstitutions, creditors, or other parties. | uptcy, did you give a finan | cial statement to | anyone about your business? | Include all financial |
| | No | | | | |
| | Yes. Fill in the details below. | | | | |
| | Name Address | Date Issued | | | |
| (| (Number, Street, City, State and ZIP Code) | | | | |
| | 12: Sign Below | | | | |
| are tru | e read the answers on this Statement of ue and correct. I understand that making a bankruptcy case can result in fines up S.C. §§ 152, 1341, 1519, and 3571. | g a false statement, conce | aling property, o | or optaining money or property i | ury that the answer by fraud in connecti |
| Migu | uel A. Ibarra ature of Debtor 1 | Signature of | Debtor 2 | | |
| - | 02-16-2018 | Date | | | |
| | | etement of Financial Affairs fo | r Individuale Filing | for Bankruptcy | p |

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| Fill in this infor | mation to identify your | case: | | |
|---------------------------------|---|-----------------------|--|--------------------------------------|
| Debtor 1 | Miguel A. Ibarra | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DIS | TRICT OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | ☐ Check if this is an |
| | | | | amended filing |
| | | | | |
| Official Fo | rm 100 | | | |
| | | | | _ |
| Stateme | nt of Intentio | n tor indiv | iduals Filing Under Chapt | er / 12/15 |
| | | | | |
| - | lividual filing under cha | - | I out this form if: | |
| creditors have | e claims secured by yo | ur property, or | | |
| | sed personal property a | | | |
| | | | you file your bankruptcy petition or by the date s | |
| wnich on the | • | ie court extenas th | e time for cause. You must also send copies to the | ne creditors and lessors you list |
| | | | | |
| | eople are filing togethe nd date the form. | r in a joint case, bo | th are equally responsible for supplying correct i | nformation. Both debtors must |
| 0.9 0. | | | | |
| | | | s needed, attach a separate sheet to this form. On | the top of any additional pages, |
| write y | our name and case nu | nber (if Known). | | |
| Part 1: List Y | our Creditors Who Hav | e Secured Claims | | |
| | | | | |
| 1. For any credit information b | | art 1 of Schedule D | : Creditors Who Have Claims Secured by Propert | ty (Official Form 106D), fill in the |
| | reditor and the property t | hat is collateral | What do you intend to do with the property tha | at Did you claim the property |
| | | | secures a debt? | as exempt on Schedule C? |
| One ditente | | | _ | _ |
| Creditor's | | | ☐ Surrender the property. | □ No |
| name: | | | Retain the property and redeem it. | □Yes |
| Description of | f | | ☐ Retain the property and enter into a Reaffirmation Agreement. | ப 169 |
| property | | | Retain the property and [explain]: | |
| securing debt | ·· · | | = | |
| = | | | - | |

Official Form 108

Creditor's

Creditor's

Description of

securing debt:

Description of

securing debt:

name:

property

Creditor's

name:

property

Statement of Intention for Individuals Filing Under Chapter 7

 \square Surrender the property.

☐ Surrender the property.

☐ Surrender the property.

☐ Retain the property and redeem it.

☐ Retain the property and enter into a

☐ Retain the property and [explain]:

☐ Retain the property and redeem it.

 \square Retain the property and enter into a

Reaffirmation Agreement.

☐ Retain the property and [explain]:

Reaffirmation Agreement.

□ No

☐ Yes

□ No

☐ Yes

☐ No

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| ebtor 1 Miguel A. Ibarra | Case number (if known) | | | |
|---|---|---|--|--|
| name: Description of property securing debt: | □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: | ☐ Yes | | |
| the information below. Do not list real estate leas | eases listed in Schedule G: Executory Contracts and Une es. Unexpired leases are leases that are still in effe ease if the trustee does not assume it. 11 U.S.C. § 3 | ct, the lease period has not yet chaca. | | |
| escribe your unexpired personal property leases | | Will the lease be assumed? | | |
| essor's name: | | □ No | | |
| escription of leased roperty: | | ☐ Yes | | |
| essor's name: | | □ No | | |
| escription of leased | | ☐ Yes | | |
| operty. | | □ No | | |
| essor's name: escription of leased operty: | | ☐ Yes | | |
| essor's name: | | □ No | | |
| escription of leased roperty: | | ☐ Yes | | |
| essor's name: | | □ No | | |
| escription of leased roperty: | | ☐ Yes | | |
| essor's name: | | □ No | | |
| escription of leased roperty: | | ☐ Yes | | |
| essor's name: | | □ No | | |
| escription of leased eroperty: | | ☐ Yes | | |
| Part 3: Sign Below | cated my intention about any property of my estate | that secures a debt and any personal | | |
| roperty that is subject to an unexpired lease. | | | | |
| Miguel A. Ibarra Signature of Debtor 1 | Signature of Debtor 2 | | | |
| Date 02-16-2018 | Date | | | |

page 2

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation |
|------------|--------------------|
| \$245 | filing fee |
| \$75 | administrative fee |
| + \$15 | trustee surcharge |
| \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 18-04438 Doc 1 Filed 02/19/18 Entered 02/19/18 17:49:15 Desc Main Document Page 50 of 59

B2030 (Form 2030) (12/15)

United States Bankruptcy Court

| | | District of Illinois | | |
|-------|---|--|---|--|
| | Minus A Iborro | | Case No. | |
| In re | Miguel A. Ibarra | Debtor(s) | Chapter | 7 |
| | DISCLOSURE OF COMPENSAT | ION OF ATTO | RNEY FOR DE | EBTOR(S) |
| | ursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I compensation paid to me within one year before the filing of the erendered on behalf of the debtor(s) in contemplation of or in or | rtify that I am the attor | ney for the above nan | ned debtor(s) and that to me, for services rendered or to |
| | For legal services, I have agreed to accept | | | 1,265.00 |
| | Prior to the filing of this statement I have received | | | 1,265.00 |
| | Balance Due | | ¢. | 0.00 |
| | | | | |
| 2. | The source of the compensation paid to me was: | | | |
| | ■ Debtor □ Other (specify): | | | |
| 3. | The source of compensation to be paid to me is: | | | |
| | ■ Debtor □ Other (specify): | | | |
| | 보고하다 그렇게 하는 얼마나 하는 것이 없었다. 나는 그는 그 모든 그는 그는 | - with any other perso | n unless they are men | abers and associates of my law firm. |
| | I have not agreed to share the above-disclosed compensation | | | |
| | ☐ I have agreed to share the above-disclosed compensation w copy of the agreement, together with a list of the names of | ith a person or persons the people sharing in the | who are not member ne compensation is at | s or associates of my law firm. A tached. |
| 5. | In return for the above-disclosed fee, I have agreed to render le | gal service for all aspe | cts of the bankruptcy | case, including: |
| | a. Analysis of the debtor's financial situation, and rendering act. b. Preparation and filing of any petition, schedules, statement. c. Representation of the debtor at the meeting of creditors and. d. [Other provisions as needed] Negotiations with secured creditors to reduce reaffirmation agreements and applications as 522(f)(2)(A) for avoidance of liens on household. | confirmation hearing, e to market value; e needed; preparatio | and any adjourned he | earings thereof; |
| 6. | By agreement with the debtor(s), the above-disclosed fee does Representation of the debtors in any dischargany other adversary proceeding. | not include the followingeability actions, ju | ng service: dicial lien avoidan | ces, relief from stay actions or |
| - | | RTIFICATION | | |
| | I certify that the foregoing is a complete statement of any agreed pankruptcy proceeding. 2/16/18 Date | Thayer C. Torg Signature of Alton Law Office of 1 2400 North We Chicago, IL 60 | erson Thayer C. Torgerso Stern Avenue 647 Fax: 773-772-0845 | lorgen |

Name of law firm

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 7 DEBTORS AND THEIR ATTORNEYS

Chapter 7 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure—but Chapter 7 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 7 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from by their attorneys, but debtors also have responsibilities to their attorneys. By signing this agreement, debtors and their attorneys accept these responsibilities.

BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Advise the debtor of the need to maintain appropriate insurance.

AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor will also bring to the meeting a social security card.) The debtor must be present in time for check-in and when the case is called for the actual examination.
- 2. Notify the attorney of any change in the debtor's address or telephone number.
- 3. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 4. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 5. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce).
- 6. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 7. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 8. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.

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- 5. Timely submit to the Chapter 7 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely prepare, file, and serve any necessary statements, amended statements and schedules and any change of address, in accordance with information provided by the debtor.
- 7. Monitor all incoming case information for accuracy and com-pleteness. Contact the trustee promptly regarding any discrepancies.
- 8. Be available to respond to the debtor's questions throughout the term of the plan.
- 9. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 10. Object to improper or invalid claims.
- 11. Timely respond to motions for relief from stay.
- 12. Prepare, file, and serve all appropriate motions to avoid liens.
- 13. Provide any other legal services necessary for the administration of the case.

ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES

1. Any attorney retained to represent a debtor in a Chapter 7 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a fee of

\$1,265.00 Attorney's Fees \$335.00 Filing Fee

- 2. Prior to signing this agreement the attorney has received \$\sum_{1,600.00}\$ leaving a balance due of \$\sum_{0.00}\$. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.
- 3. Early termination of the case. Fees payable under the provisions set out above are not refundable in the event that the case is dismissed, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If a dismissal is due to such a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 4. Retainers. The attorney may receive a retainer or other payment before filing the case,

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but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.

- a. Any retainer received by the attorney will be treated as an advance payment, allowing the attorney to take the retainer into income immediately. The reason for this treatment is the following:
- 5. In any application for fees, whether or not requiring an itemization, the attorney shall disclose to the court any fees paid by the debtor prior to the case filing.
- 6. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 7. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise not engaging in proper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 8. Discharge of the attorney. The debtor may discharge the attorney at any time.

Debtor: mgul a. Ibana

Date: 02-16-2018

Joint Debtor:

Date: 2/16/18

Attorney for Deptor(s)

Debtor(s)

Do not sign if the fee amounts at top of this page are blank.

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United States Bankruptcy Court Northern District of Illinois

| | | Northern District of Ininois | | |
|-------|--|--------------------------------------|-----------|---|
| In re | Miguel A. Ibarra | | Case No. | |
| | | Debtor(s) | Chapter 7 | |
| | VERIFICATION OF CREDITOR MATRIX | | | |
| | | Number of Creditors: | | 3 |
| | The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of m (our) knowledge. | | | |
| Date: | 02-16-2018 | Miguel A. Ibarra Signature of Debtor | bana | |

Applied Bank Po Box 17125 Wilmington, DE 19850

Bank Of America Nc4-105-03-14 Po Box 26012 Greensboro, NC 27410

Capital One Attn: General Correspondence/Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Capital One Attn: General Correspondence/Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Capital One Attn: General Correspondence/Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Capital One Attn: General Correspondence/Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Capital One Na Attn: General Correspondence/Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Cbusasears Citicorp Credit Srvs/Centralized Bankrup Po Box 790040 Saint Louis, MO 63179

Chase Card Services Attn: Correspondence Dept Po Box 15298 Wilmington, DE 19850 Chase Card Services Attn: Correspondence Dept Po Box 15298 Wilmington, DE 19850

Citibak/Office Depot Citicorp Credit Srvc/Centralized Bankrup Pob 790040 St Louis, MO 63179

Citibank / Sears Citicorp Credit Services/Attn: Centraliz Po Box 790040 Saint Louis, MO 63179

Citibank North America Citicorp Credit Srvs/Centralized Bankrup Po Box 790040 Saint Louis, MO 63179

Citibank/Best Buy Citicorp Credit Srvs/Centralized Bankrup Po Box 790040 St. Louis, MO 63179

Citibank/Sears Citicorp Credit Srvs/Centalized Bankrupt Po Box 790040 St. Louis, MO 63179

Citicards Cbna Citicorp Credit Svc/Centralized Bankrupt Po Box 790040 Saint Louis, MO 63179

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Comenity Bank/Carsons Po Box 182125 Columbus, OH 43218 First Premier Bank 601 S Minnesota Ave Sioux Falls, SD 57104

First Premier Bank Po Box 5524 Sioux Falls, SD 57117

Kohls/Capital One Kohls Credit Po Box 3043 Milwaukee, WI 53201

OneMain Financial Attn: Bankruptcy Department 601 Nw 2nd St #300 Evansville, IN 47708

Syncb/hhgreg Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Syncb/PLCC Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Synchrony Bank/ JC Penney Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Synchrony Bank/ JC Penneys Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Synchrony Bank/Walmart Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Tnb-Visa (TV) / Target C/O Financial & Retail Services Mailstop BV PO Box 9475 Minneapolis, MN 55440

Visa Dept Store National Bank/Macy's Attn: Bankruptcy Po Box 8053 Mason, OH 45040

Visa Dept Store National Bank/Macy's Attn: Bankruptcy Po Box 8053 Mason, OH 45040

Wells Fargo Financia Po Box 94498 Las Vegas, NV 89193